

## **QUARTERLY STATEMENT**

AS OF SEPTEMBER 30, 2018 OF THE CONDITION AND AFFAIRS OF THE

## Aetna Better Health of Michigan Inc.

Organizad under the Laws of	(Current)	(Prior)		The same of the sa	20-1032697
Organized under the Laws of	111	Michigan	, State of Domicile or Port of En	try	MI
Country of Domicile		United Stat			
Licensed as business type:		Health Maintena	ance Organization		
Is HMO Federally Qualified? Y	es[ ] No[ X]				
Incorporated/Organized	04/22/20	004	Commenced Business		10/01/2004
Statutory Home Office	1333 Grat		j	Detroit, MI, U	
	(Street an	d Number)	(City or	Town, State, Co	ountry and Zip Code)
Main Administrative Office			iot, Ste. 400 nd Number)		
/City or T	Detroit, MI, US 48207		200000000	313-465	
	own, State, Country and		(Ar		phone Number)
Mail Address	1333 Gratiot, S (Street and Number		(City or	Detroit, MI, U	US 48207 Duntry and Zip Code)
Primary Location of Books and			tiot, Ste. 400	Control of the contro	CONTROL STATE OF THE STATE OF T
		(Street ar	nd Number)	10000000	
(City or T	Detroit, MI, US 48207 own, State, Country and		(Ar	313-465 ea Code) (Tele	-1519 phone Number)
Internet Website Address		www.aetnab	etterhealth.com		THE PART OF THE PA
Statutory Statement Contact	Fran	k Ferris Chronister III	X 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	717	-541-5742
THE COURSE OF STREET PARTY.		(Name)		(Area Code) (	(Telephone Number)
Sta	tutoryReporting@aetna.c (E-mail Address)	com		717-526 (FAX Nu	
		OFF	CERS		
President and Chief Execu	tive Officer		Corporate Cor	ntroller	Frank Ferris Chronister III
Vice President and	Secretary	Robert Mark Kessler			
Kevin James Casev. Ser	nior Investment Officer	John Patrick Maroney V	HER	Dehra I	ean Bacon, Chief Financial Officer
	nor investigation cancer			Debias	ean bacon, Chier Financial Officer
Beverly Ar		Debra .	OR TRUSTEES lean Bacon		Laurie Ann Brubaker
Janet Rut	h Grant	Ernestine Tina	Siggers-Romero		Harvey Douglas Turner
above, all of the herein describe this statement, together with rel of the condition and affairs of the completed in accordance with t (2) that state rules or regulation belief, respectively. Furthermo	ad assets were the absolitated exhibits, schedules ated exhibits, schedules are said reporting entity at the NAIC Annual Statem is require differences in re, the scope of this atter formatting differences diment.	ute property of the said reportin and explanations therein contains of the reporting period stated ant Instructions and Accounting reporting not related to accounstation by the described officer use to electronic filing) of the end	g entity, free and clear from any ned, annexed or referred to, is a above, and of its income and de Practices and Procedures man ting practices and procedures, as as also includes the related corre	full and true standard true st	y, and that on the reporting period stated thereon, except as herein stated, and that thement of all the assets and liabilities and rom for the period ended, and have beer extent that: (1) state law may differ, or best of their information, knowledge and ronic filing with the NAIC, when required quested by various regulators in fieu of our property of the control
President and Chief Ex	ecutive Officer	Vice Preside	nt and Secretary		Corporate Controller
State of Arizona County of Maricopa		State of Arizona County of Maricopa			Pennsylvania Montgomery
Subscribed and sworn to before		Subscribed and sworn to b			d and sworn to before me this
33 day of Octob	2018	24 day of _6 (1	ober, 2018	13t day	101 November 2018
mount	se	mout	inse		
NOTARY PUBLIC (Seal)		NOTARY PUBLIC (Seal)		NOTARY F	PUBLIC (Seal)
JANEEN NEW Notary Public State Manicopa C My Commission February 08	ounty Expires	Notary Public. Maricon My Commis	NEWHOUSE State of Arizona is County sistem Express y 08, 2019	Whitps	NOTARIAL SEAL  NOTARIAL SEAL  KIM E. ROTH, Notary Public ain Township, Montgomery County  mmission Expires April 25, 2021

a. Is this an original filing? ...... Yes [X] No [ ] b. If no.

1. State the amendment number...

2. Date filed......

3. Number of pages attached.....

# **ASSETS**

		<u> </u>	Current Statement Date	•	4
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	15,954,082	0		1,200,283
2.	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks			0	0
3.	Mortgage loans on real estate:				
	3.1 First liens			0	
	3.2 Other than first liens			0	
4.	Real estate:				
	4.1 Properties occupied by the company (less \$				
	encumbrances)			0	
	4.2 Properties held for the production of income (less summarized encumbrances)			0	
	4.3 Properties held for sale (less \$ encumbrances)			0	
_	,				
5.	Cash (\$5,581,603 ), cash equivalents				
	(\$	00 405 005		00 405 005	404 400 050
_	investments (\$ )				
6.	Contract loans (including \$ premium notes)			0	
7.	Derivatives		0	0	0
8.	Other invested assets				0
9.	Receivables for securities			0	
10.	Securities lending reinvested collateral assets			0	0
11.	Aggregate write-ins for invested assets			0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	109, 139,307	U	109, 139, 307	
13.	Title plants less \$ charged off (for Title insurers				
4.4	only)				
	Investment income due and accrued	90,900	0	93,965	1,343
15.	Premiums and considerations:  15.1 Uncollected premiums and agents' balances in the course of collection	12 600 900	0	12 600 900	0 267 702
		12,099,099		12,099,099	0,307,702
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$			0	
	earned but unbilled premiums)				
	15.3 Accrued retrospective premiums (\$	020 206	0	020 206	027 600
40		930,366	0	930,366	937,090
16.	Reinsurance:  16.1 Amounts recoverable from reinsurers			0	0
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				0
	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets				
۷۱.	(\$			n	
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$4,373,799 ) and other amounts receivable				
25.	Aggregate write-ins for other than invested assets				
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
_0.	Protected Cell Accounts (Lines 12 to 25)	137,029,469	5 , 136 , 134	131,893,335	121,493,662
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
28.	Total (Lines 26 and 27)	137,029,469	5, 136, 134	131,893,335	121,493,662
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	Intangible Assets and Amortization	79,500	79,500	0	0
2502.	Prepaid Exp	1,442	1,442	0	0
2503.			,		
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	80,942	80,942	0	0

# **LIABILITIES, CAPITAL AND SURPLUS**

		1	Current Period 2	3	Prior Year
					7
		Covered	Uncovered	Total	Total
2.	Claims unpaid (less \$ reinsurance ceded)	48,574,985	7,769,969	56,344,954	60,512,631
	Accrued medical incentive pool and bonus amounts	2,310,516		2,310,516	1,659,140
	Unpaid claims adjustment expenses			808,294	900,118
	Aggregate health policy reserves, including the liability of				
	\$0 for medical loss ratio rebate per the Public				
	Health Service Act			0	0
5.	Aggregate life policy reserves				
	Property/casualty unearned premium reserve				
	Aggregate health claim reserves				
	Premiums received in advance				
9.	General expenses due or accrued	8,801,149		8,801,149	1,050,590
	Current federal and foreign income tax payable and interest thereon				
,	(including \$ on realized gains (losses))	80,281		80,281	1,683,256
10.2	Net deferred tax liability			0	
11.	Ceded reinsurance premiums payable			0	
12.	Amounts withheld or retained for the account of others			0	
	Remittances and items not allocated				116,201
	Borrowed money (including \$ current) and	·			
	interest thereon \$ (including				
	\$ current)			0	
45	Amounts due to parent, subsidiaries and affiliates				11 540 776
	•				
	Derivatives				
	Payable for securities				
18.	Payable for securities lending			0	
19.	Funds held under reinsurance treaties (with \$				
	authorized reinsurers, \$ unauthorized				
	reinsurers and \$ certified reinsurers)			0	
20.	Reinsurance in unauthorized and certified (\$				
	companies	,		0	
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
	Liability for amounts held under uninsured plans				1,945,188
	Aggregate write-ins for other liabilities (including \$	, ,		, ,	,,,,,
	current)	495 600	0	495 600	579,846
	Total liabilities (Lines 1 to 23)		7,769,969		
	Aggregate write-ins for special surplus funds				7,117,000
	Common capital stock				10
	Preferred capital stock				
	Gross paid in and contributed surplus				
	Surplus notes				
	Aggregate write-ins for other than special surplus funds				0
31.	Unassigned funds (surplus)	XXX	XXX	15,173,619	(1,212,084)
32.	Less treasury stock, at cost:				
	32.1shares common (value included in Line 26				
	\$	xxx	XXX		
	32.2 shares preferred (value included in Line 27				
	\$	XXX	XXX		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)				
	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	131,893,335	121,493,662
	DETAILS OF WRITE-INS				
2301.	Abandoned Property Liability	495,600	0	495,600	579,846
2302.					
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	495,600	0	495,600	579,846
2501.	Estimated Health Insurance Fee accrual	XXX	XXX	0	7.117.000
2502.					
2503.					
	Summary of remaining write-ins for Line 25 from overflow page				
	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	7,117,000
3098.	Summary of remaining write-ins for Line 30 from overflow page	xxx	XXX	0	0
	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

# **STATEMENT OF REVENUE AND EXPENSES**

		Current Y		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	1001		479,000	633,085
2.	Net premium income ( including \$ non-health				
	premium income)				
3.	Change in unearned premium reserves and reserve for rate credits				
4.	Fee-for-service (net of \$ medical expenses)	XXX			0
5.	Risk revenue				0
6.	Aggregate write-ins for other health care related revenues				
7.	Aggregate write-ins for other non-health revenues				
8.	Total revenues (Lines 2 to 7)	XXX	220,658,154	269,285,680	349,511,462
0	Hospital and Medical:	10 007 005	106 500 000	100 000 166	225 007 220
9.	Hospital/medical benefits				
10. 11.	Outside referrals				_
12.	Emergency room and out-of-area				
13.	Prescription drugs				
14.	Aggregate write-ins for other hospital and medical				0
15.	Incentive pool, withhold adjustments and bonus amounts				1,640,709
16.	Subtotal (Lines 9 to 15)			240,025,804	303,653,190
	Less:				
17.	Net reinsurance recoveries	·	36,459	70,459	70,459
18.	Total hospital and medical (Lines 16 minus 17)	20,922,433	174,588,615	239,955,345	303,582,731
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$13,316,861 cost				
	containment expenses				
21.	General administrative expenses		24,572,686	24,399,600	24,127,033
22.	Increase in reserves for life and accident and health contracts				
	(including \$ increase in reserves for life only)				
23.	Total underwriting deductions (Lines 18 through 22)				
24.	Net underwriting gain or (loss) (Lines 8 minus 23)				
25.	Net investment income earned		1,854,006	848,410	1,083,335
26.	Net realized capital gains (losses) less capital gains tax of \$(172)		(123, 110)	(4.860)	(4.876)
27.	Net investment gains (losses) (Lines 25 plus 26)				1,078,459
28.	Net gain or (loss) from agents' or premium balances charged off [(amount		1,700,000		1,070,400
20.	recovered \$				
	, , , , , , , , , , , , , , , , , , , ,				
29.	Aggregate write-ins for other income or expenses	0	(237,600)	(237,600)	(316,800)
30.	Net income or (loss) after capital gains tax and before all other federal				
	income taxes (Lines 24 plus 27 plus 28 plus 29)			(5,319,396)	2,065,973
31.	Federal and foreign income taxes incurred		2,530,687	(1,824,214)	(1,098,312)
32.	Net income (loss) (Lines 30 minus 31)	XXX	5,637,145	(3,495,182)	3,164,285
	DETAILS OF WRITE-INS				
0601.					
0602.		XXX			
0603.		XXX			
0698.	, ,		0		0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	U
0701.					
0702.		XXX			
0703.					
0798.	Summary of remaining write-ins for Line 7 from overflow page		0		0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	U
1401.					
1402.					
1403					
1498.	Summary of remaining write-ins for Line 14 from overflow page				0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	(007,000)	(007, 000)	(040,000)
2901.	Intangible Assets and Amortization		(237,600)	(237,600)	(316,800)
2902.					
2903					
2998.	Summary of remaining write-ins for Line 29 from overflow page		0	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	(237,600)	(237,600)	(316,800)

**STATEMENT OF REVENUE AND EXPENSES (Continued)** 

	STATEMENT OF REVENUE AND EX	LENSES (	ontinued	
		1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	41,505,916	34,160,858	34,160,858
34.	Net income or (loss) from Line 32	5,637,145	(3,495,182)	3, 164, 285
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$0			
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax	1,360,363	(3,347,889)	(3,347,888)
39.	Change in nonadmitted assets	2,271,195	837,028	(2,471,339)
40	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in	0	0	0
	44.2 Transferred from surplus (Stock Dividend)	0		
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in	0	0	10,000,000
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	9,268,703	(6,006,043)	7,345,058
49.	Capital and surplus end of reporting period (Line 33 plus 48)	50,774,619	28,154,815	41,505,916
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

# **CASH FLOW**

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	216,333,261	272, 165, 938	341,453,742
2.	Net investment income	1,760,732	846,837	1,084,210
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	218,093,993	273,012,774	342,537,951
5.	Benefit and loss related payments	177, 195, 260	236,453,281	306,529,103
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	31,356,594	34,646,645	43,879,162
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
	gains (losses)	4,133,490	(4,536,588)	(4,782,014
10.	Total (Lines 5 through 9)	212,685,344	266,563,339	345,626,251
11.	Net cash from operations (Line 4 minus Line 10)	5,408,649	6,449,436	(3,088,300
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	1,207,847	0	0
	12.2 Stocks	0	0	0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate	0	0	0
	12.5 Other invested assets	0	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(837)	19	7
	12.7 Miscellaneous proceeds	0	0	C
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	1,207,010	19	7
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	16,083,259	0	0
	13.2 Stocks	0	0	0
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	16,083,259	0	0
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(14,876,249)	19	7
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock	0	0	10,000,000
	16.3 Borrowed funds	0	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders	0	0	0
	16.6 Other cash provided (applied)	(1,747,425)	(7,888,835)	(5,550,676
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(1,747,425)	(7,888,835)	4,449,324
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(11,215,025)	(1,439,381)	1 361 031
19.	Cash, cash equivalents and short-term investments:			.,00.,001
	19.1 Beginning of year	104.400.250	103,039,218	103.039.218
		···· , ···· , , , , , ,	,,	,,

Note: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0001. Non-Cash Transactions -Intercompany		0
. ,		

# **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

		Comprehe (Hospital & I	ensive	4	5	6	7	8	9	10
		2	3	Medicare	Vision	Dental	Federal Employees Health Benefit	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year	50,421	0	0	0	0	0	0	7,333	43,088	
2. First Quarter	48,011	0	0	0	0	0	0	7,591	40,420	
3. Second Quarter	46,347	0	0	0	0	0	0	7,834	38,513	
4. Third Quarter	44,793							6,990	37,803	
5. Current Year	0									
6. Current Year Member Months	422,515							67,439	355,076	(
Total Member Ambulatory Encounters for Period:										
7 Physician	204,942							97,858	107,084	
8. Non-Physician	232,890							115,503	117,387	
9. Total	437,832	0	0	0	0	0	0	213,361	224,471	(
10. Hospital Patient Days Incurred	13,858							7,602	6,256	
11. Number of Inpatient Admissions	2,853							1,358	1,495	
12. Health Premiums Written (a)	221,086,452							117,360,667	103,725,785	
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	221,079,149							117,353,364	103,725,785	
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	186,913,082							97,454,243	89,458,839	
18. Amount Incurred for Provision of Health Care Services	174,625,074							94,524,680	80,100,394	

# CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

	Aging Analysis of Unpaid Claims											
1	2	3	4	5	6	7						
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total						
Claims Unpaid (Reported)												
0299999 Aggregate accounts not individually listed-uncovered	495		39,249		20,285	668,254						
0399999 Aggregate accounts not individually listed-covered	4,801				608,267	6,046,748						
0499999 Subtotals	5,296	365 800,849	(32,328)	21,564	628,552	6,715,002						
0599999 Unreported claims and other claim reserves						49,629,952						
0699999 Total amounts withheld						<u>C</u>						
0799999 Total claims unpaid						56,344,954						
0899999 Accrued medical incentive pool and bonus amounts	<u> </u>		·	·		2,310,516						

# **UNDERWRITING AND INVESTMENT EXHIBIT**

#### ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLA	MS UNPAID - PRIOR YEAR - NET OF REINSU	JRANCE				
		Claims Paid Liability				
	Year to		End of Curre	ent Quarter		
	1	2	3	4		
						Estimated Claim
	On		On			Reserve and
	Claims Incurred Prior	On	Claims Unpaid	On	Claims Incurred in	Claim Liability
	to January 1 of	Claims Incurred	Dec. 31	Claims Incurred	Prior Years	December 31 of
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year
		3		<u> </u>	,	
Comprehensive (hospital and medical)		0	0	0	0	
O. Madiana Constant	0	٥	0	0	0	(
Medicare Supplement			0	0	0	
3. Dental Only	0	0	0	0	0	(
o. Donat on,						
4. Vision Only		0	0	0	0	(
		•		•		,
5. Federal Employees Health Benefits Plan		0	0	0	0	
6. Title XVIII - Medicare	16,786,210	80,668,038	2,211,125	26,238,858	18,997,335	27,993,749
6. Title AVIII - Iviedicare	10,700,210	00,000,000	2,211,123	20,200,000		21,330,140
7 Title XIX - Medicaid	14,737,627	74,500,342	7, 184, 459	20,710,512	21,922,086	32,518,882
	, , ,	, , , , , , , , , , , , , , , , , , , ,	, ,	, , ,	, ,	, ,
	_	_	_	_	_	
8. Other health	0	0	0	0	0	(
O Harlib substated (Licrop 4 to 0)		155 , 168 , 380	9,395,584	46,949,370	40,919,421	60,512,63
9. Health subtotal (Lines 1 to 8)	31,020,001	133, 100,300	9,393,364	40,949,370	40,919,421	00,312,03
10. Healthcare receivables (a)	3,621,100	5, 150, 612	0	0	3,621,100	(
	0,021,100	, 100,012				
11. Other non-health		0	0	0	0	(
		404 444	704 000	4 500 407	704 000	4 050 444
12. Medical incentive pools and bonus amounts		184,411	724,329	1,586,187	724,329	1,659,140
13. Totals (Lines 9-10+11+12)	27.902.737	150,202,179	10,119,913	48,535,557	38,022,650	62,171,77
13. Tulais (Lines 3-10+11+12)	21,302,131	100,202,173	טו פ, פוו, טו	100,000,001	00,022,000	04, ۱/۱,//

(a) Excludes \$ ...... loans or advances to providers not yet expensed.

### **NOTES TO FINANCIAL STATEMENTS**

#### 1. Summary of Significant Accounting Policies and Going Concern

#### A. Accounting Practices

The accompanying statutory financial statements of Aetna Better Health of Michigan, Inc. ("the Company"), indirectly a wholly-owned subsidiary of Aetna Inc. ("Aetna"), have been prepared in conformity with accounting practices prescribed or permitted by the Michigan Insurance Department (Michigan Department) (Michigan Accounting Practices). The Michigan Department recognizes only statutory accounting practices prescribed or permitted by the State of Michigan for determining and reporting the financial condition and results of operations of an insurance company, which include accounting practices and procedures adopted by the National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures Manual ("NAIC SAP").

A reconciliation of the Company's net income and surplus between NAIC SAP and practices prescribed and permitted by the State of Michigan for the periods ended September 30, 2018 and December 31, 2017 is as follows:

		SSAP#	F/S Page	F/S Line #	2018	2017
NET IN	NCOME					
(1)	State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	5,637,145	3,164,285
(2)	State Prescribed Practices that increase/(decrease) NAIC SAP:					
(3)	State Permitted Practices that increase/(decrease) NAIC SAP:					
(4)	NAIC SAP (1-2-3=4)	XXX	xxx	XXX	5,637,145	3,164,285
SURPL	LUS					
(5)	State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	50,774,619	41,505,916
(6)	State Prescribed Practices that increase/(decrease) NAIC SAP:					
(7)	State Permitted Practices that increase/(decrease) NAIC SAP:					
(8)	NAIC SAP (5-6-7=8)	XXX	xxx	XXX	50,774,619	41,505,916

## B. <u>Use of Estimates in the Preparation of the Financial Statements</u>

The preparation of these financial statements in conformity with Michigan Accounting Practices requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and revenues and expenses. Actual results could differ from those estimates.

#### C. Accounting Policies

(1) through (5) - No significant change.

### (6) Securities Lending

The Company engages in securities lending by lending certain securities from its investment portfolio to other institutions for short periods of time. Borrowers must post cash collateral in the amount of 102% to 105% of the fair value of a loaned security. The fair value of the loaned securities is monitored on a daily basis, with additional collateral obtained or refunded as the fair value of the loaned securities fluctuates. The collateral is retained and invested by a lending agent according to the Company's guidelines to generate additional investment income for the Company. Pursuant to Statements of Statutory Accounting Principles ("SSAP") No. 103R - Transfers and Servicing of Financial Assets and Extinguishments of Liabilities ("SSAP No. 103R"), collateral required under the Company's securities lending program is carried on the Company's Statutory Statements of Assets and Liabilities, Capital and Surplus as both a receivable and payable. Also pursuant to SSAP No. 103R, if the collateral received from a counterparty is less than 100 percent at the reporting date, the difference between the actual collateral and 100 percent is nonadmitted. Collateral value is measured and compared to the loaned securities in aggregate by counterparty. The Company did not have any loaned securities at September 30, 2018.

(7) through (21) - No significant change.

#### D. Going Concern

As of November 13, 2018, management has evaluated whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern and management has determined that it is not probable that the Company will be unable to meet its obligations as they become due within one year after the financial statements are available to be issued. Management will continuously evaluate the Company's ability to continue as a going concern and will take appropriate action and will make appropriate disclosures if there is any change in any condition or events that would raise substantial doubt about the Company's ability to continue as a going concern.

#### 2. <u>Accounting Changes and Corrections of Errors</u>

The company makes pass through payments on behalf of the Michigan Department of Health and Human Services. Previously, funds received from MDHHS that were required to be pass through to providers were recorded as premium income and the corresponding payments made to providers recorded as hospital and medical cost. As of the September 30, 2018 reporting period, effective January 1, 2018, funds received and payments made on behalf of MDHHS are now netted, and any variance between the two recorded to general administrative expense. There is no impact to capital and surplus as a result of this change.

#### 3. Business Combinations and Goodwill

No significant change.

#### 4. <u>Discontinued Operations</u>

No significant change.

#### 5. <u>Investments</u>

A. - C: No significant change.

#### D. Loan-Backed Securities

- (1) Prepayment assumptions for single class and multi-class mortgage backed/asset backed securities were obtained from industry market sources.
- (2) The Company had no other-than-temporary impairment ("OTTI") losses during the third quarter of 2018 on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with Statements of Statutory Accounting Principles ("SSAP") No. 43R, Loan-Backed and Structured Securities ("SSAP No. 43R").
- (3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis, at the reporting date September 30, 2018.
- (4) The Company had no unrealized loss position on loan-backed and structured securities held by the Company at September 30, 2018.
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
  - (1) and (2): No significant change.
  - (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of September 30, 2018.
  - (4) through (7): No significant change.
- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at September 30, 2018.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured at September 30, 2018.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at September 30, 2018
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at September 30, 2018.
- J. through L: No significant change.
- M. The Company did not have any working capital finance investments at September 30, 2018.
- N. The Company did not have any offsetting and netting of financial assets or liabilities at September 30, 2018.

O. through R: No significant change.

#### 6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

#### 7. <u>Investment Income</u>

No significant change.

#### 8. <u>Derivative Instruments</u>

No significant change.

#### 9. <u>Income Taxes</u>

No significant change.

#### 10. <u>Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties</u>

No significant change.

#### 11. <u>Debt</u>

- A. The Company did not have any items related to debt, including capital notes at September 30, 2018.
- B. The Company did not have any Federal Home Loan Bank agreements at September 30, 2018.

#### 12. <u>Retirement Plans, Deferred Compensation Postemployment Benefits and Compensated Absences and Other</u> Postretirement Benefit Plans

The Company did not have a retirement plan, deferred compensation plan, or other postretirement benefit plan at September 30, 2018.

#### 13. <u>Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations</u>

No significant change.

## 14. <u>Liabilities, Contingencies and Assessments</u>

No significant change.

#### 15. Leases

No significant change.

#### Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

No significant change.

#### 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

#### A. <u>Transfers of Receivables Reported as Sales</u>

No significant change.

### B. <u>Transfer and Servicing of Financial Assets</u>

- (1) No significant change.
- (2) and (3): The Company did not have any servicing assets or liabilities at September 30, 2018.
- (4) The Company did not have any securitized financial assets at September 30, 2018.
- (5) through (7): No significant change.

#### C. Wash Sales

(1) The Company did not have any wash sales for the period ended September 30, 2018.

# 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans The plan receives certain payments from the Michigan Department of Health and Human Services (MDHHS) that must be passed through to providers. Total pass through payments through September 30, 2018 received and paid on behalf of MDHHS totaled \$ 42,724,595.

#### 19. <u>Direct Premium Written/Produced by Managing General Agents/Third Party Administrators</u>

No significant change.

#### 20. Fair Value Measurements

A. and B.

The Company had no material assets or liabilities measured and reported at fair value at September 30, 2018

C. Certain of the Company's financial instruments are measured at fair value in the financial statements. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy established by U.S. generally accepted accounting principles. The following are the levels of the hierarchy and a brief description of the type of valuation information ("inputs") that qualifies a financial asset or liability for each level:

Level 1 - Unadjusted quoted prices for identical assets or liabilities in active markets.

**Level 2** - Inputs other than Level 1 that are based on observable market data. These include: quoted prices for similar assets in active markets, quoted prices for identical assets in inactive markets, inputs that are observable that are not prices (such as interest rates and credit risks) and inputs that are derived from or corroborated by observable markets.

**Level 3** - Developed from unobservable data, reflecting our own assumptions.

Financial assets and liabilities are classified based upon the lowest level of input that is significant to the valuation. When quoted prices in active markets for identical assets and liabilities are available, we use these quoted market prices to determine the fair value of financial assets and liabilities and classify these assets and liabilities as Level 1. In other cases where a quoted market price for identical assets and liabilities in an active market is either not available or not observable, we estimate fair value using valuation methodologies based on available and observable market information or by using a matrix pricing model. These financial assets and liabilities would then be classified as Level 2. If quoted market prices are not available, we determine fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. Thus, financial assets and liabilities may be classified in Level 3 even though there may be some significant inputs that may be observable.

The carrying values and estimated fair values of the Company's financial instruments at September 30, 2018 were as follows:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)	Net Asset Value (NAV) Included in Level 2
Bonds, Short Term, and Cash Equivalents	103,528,063	103,557,704	11,074,397	92,453,666			

There were no material realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets at September 30, 2018. There were no transfers between the Company's Level 1 or 2 financial assets at September 30, 2018.

In evaluating the Company's management of interest rate and liquidity risk and currency exposures, the fair values of all assets and liabilities should be taken into consideration, not only those presented above.

D. The Company did not have any financial instruments where it was not practicable to estimate the fair value.

## 21. Other Items

No significant change.

#### 22. Events Subsequent

#### A. Type I - Recognized Subsequent Events

Subsequent events have been considered through November 13, 2018 for the statutory statement issued on November 14, 2018.

The Company had no known reportable recognized subsequent events.

#### B. <u>Type II - Non-Recognized Subsequent Events</u>

Subsequent events have been considered through November 13, 2018 for the statutory statement issued on November 14, 2018.

On January 1, 2018, the Company was subject to an annual fee under section 9010 of the Federal Affordable Care Act ("ACA"). This annual fee was allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for any U.S. health risk for each calendar year

beginning on or after January 1 of the year the fee is due. On October 1, 2018, the Company paid \$7,125,654 to the federal government for its portion of the health insurer fee payable on October 1, 2018.

#### 23. Reinsurance

No significant change.

#### 24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. through D: No significant change.

#### E. Risk Sharing Provisions of the Affordable Care Act

- (1) Did the reporting entity write accident and health insurance premium which is subject to the ACA risk sharing provisions (YES/NO)? Yes [ ] No [ X ].
- (2) through (5): Not applicable.

#### 25. Change in Incurred Claims and Claims Adjustment Expenses

As of September 30, 2018, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years decreased by \$24,149,119 from \$63,071,889 in 2017 to \$38,922,770 in 2018. In 2017, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years' decreased by \$11,449,837 from \$64,260,634 in 2016 to \$52,810,797 in 2017. The lower than anticipated health care cost trend rates observed in 2018 for claims incurred in 2017, were due to moderating outpatient and physician trends and faster than expected claim payment speed. The Company considers historical trend rates together with knowledge of recent events that may impact current trends when developing estimates of current trend rates. Original estimates are increased or decreased as additional information becomes known regarding individual claims. Historical health care cost trend rates are not necessarily representative of current trends.

Net coordination of benefits are implicit in the claims incurred but not reported calculation and could not be specifically identified.

#### 26. <u>Intercompany Pooling Arrangements</u>

No significant change.

#### 27. <u>Structured Settlements</u>

No significant change.

## 28. <u>Health Care Receivables</u>

No significant change.

#### 29. Participating Policies

No significant change.

#### 30. <u>Premium Deficiency Reserves</u>

No significant change.

## 31. Anticipated Salvage and Subrogation

No significant change.

# **GENERAL INTERROGATORIES**

## PART 1 - COMMON INTERROGATORIES

## **GENERAL**

1.1	Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State Domicile, as required by the Model Act?		Yes	[ ]	No	[ X ]	
1.2	If yes, has the report been filed with the domiciliary state?		Yes	[ ]	No	[ ]	
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement or reporting entity?		Yes	[ ]	No	[ X ]	
2.2	If yes, date of change:	<u>-</u>					
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more is an insurer?  If yes, complete Schedule Y, Parts 1 and 1A.		Yes	[ X ]	No	[ ]	
3.2	Have there been any substantial changes in the organizational chart since the prior quarter end?		Yes	[ X ]	No	[ ]	
3.3	If the response to 3.2 is yes, provide a brief description of those changes.  On June 29, 2018, member interest in Medicity LLC and its subsidiaries (Novo Innovations, LLC and Allviant Corporation) was transf Health Catalyst. On July 11, 2018, Canadian Insurance Company changed its name to Aetna Insurance (Hong Kong) Limited. On 2018, Aetna Partners Diversified Fund (Cayman) Ltd. was dissolved.						
3.4	Is the reporting entity publicly traded or a member of a publicly traded group?		Yes	[ X ]	No	[ ]	
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.			0001	12230	4	
4.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?		Yes	[ ]	No	[ X ]	
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity the ceased to exist as a result of the merger or consolidation.	at has					
	1 2 3 Name of Entity NAIC Company Code State of Domicile						
		]					
5.	If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorn in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? If yes, attach an explanation.	ney- ·Yes [	X ] N	0 [	]	N/A [	]
6.1	Amended and Restated Administrative Services Agreement dated 4/1/18 between the Company and Aetna Medicaid Administrators State as of what date the latest financial examination of the reporting entity was made or is being made.			12/3	1/201	5	
6.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting en date should be the date of the examined balance sheet and not the date the report was completed or released.			12/3	1/201	5	
6.3	State as of what date the latest financial examination report became available to other states or the public from either the state of do the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balar date).	nce sheet		06/14	4/201	7	
6.4 6.5	By what department or departments?  Michigan Department of Insurance and Financial Services  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?	Yes [	] N	0 [	]	N/A [	Х]
6.6	Have all of the recommendations within the latest financial examination report been complied with?	Yes [	X ] N	0 [	]	N/A [	]
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) sus revoked by any governmental entity during the reporting period?		Yes	[ ]	No	[ X ]	
7.2	If yes, give full information:						
8.1	Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?		Yes	[ ]	No	[ X ]	
8.2	If response to 8.1 is yes, please identify the name of the bank holding company.						
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?		Yes	[ ]	No	[ X ]	
8.4	If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal						
	Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.						
	1 2 3		C SE				

# **GENERAL INTERROGATORIES**

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	sonal and professional	Yes [ X ] No [ ]
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the report	ng entity;	
	<ul><li>(c) Compliance with applicable governmental laws, rules and regulations;</li><li>(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and</li></ul>		
	(e) Accountability for adherence to the code.		
9.11			
9.11	N/A		
9.2	Has the code of ethics for senior managers been amended?		Yes [ ] No [ X ]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).		100 [ ] 110 [ X ]
	N/A		
9.3	Have any provisions of the code of ethics been waived for any of the specified officers?		Yes [ ] No [ X ]
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).		
	N/A		
	FINANCIAL		
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?	,	Yes [ ] No [ X ]
	If yes, indicate any amounts receivable from parent included in the Page 2 amount:		
	INIVEOTMENT		
	INVESTMENT		
11.1		erwise made available for	V
11.2	use by another person? (Exclude securities under securities lending agreements.)  If yes, give full and complete information relating thereto:		Yes [ ] No [ X ]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:	\$	0
13.	Amount of real estate and mortgages held in short-term investments:		
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?		Yes [ ] No [ X ]
14.2	If yes, please complete the following:		
		1	2
		Prior Year-End	Current Quarter
		Book/Adjusted Carrying Value	Book/Adjusted Carrying Value
4.21	Bonds	\$ 0	\$
	Preferred Stock		\$
	Common Stock		\$
	Short-Term Investments		\$
4.25	Mortgage Loans on Real Estate	\$0	\$
4.26	All Other	\$0	\$
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)		\$0
4.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	\$
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?		Yes [ ] No [ X ]
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?		
	If no, attach a description with this statement.		

# **GENERAL INTERROGATORIES**

16.	·	rity lending program, state the amount of th		-			
		r value of reinvested collateral assets repor					
		ok adjusted/carrying value of reinvested co yable for securities lending reported on the					
17. 17.1	Excluding items in Schedule E offices, vaults or safety depo custodial agreement with a q Outsourcing of Critical Funct	E - Part 3 - Special Deposits, real estate, most boxes, were all stocks, bonds and other ualified bank or trust company in accordanions, Custodial or Safekeeping Agreements by with the requirements of the NAIC Finance	ortgag securi nce wit s of the	e loans and investments he ities, owned throughout the h Section 1, III - General Ex e NAIC Financial Condition	Id physically in the reporting ent current year held pursuant to a amination Considerations, F. Examiners Handbook?	tity's	[ X ] No [ ]
		1			2		
	Nan	ne of Custodian(s) Company	1	Cust	odian Address		
	State Street Bank and Trust	Company			One Lincoln Street; Boston,		
17.2	For all agreements that do not location and a complete expl	t comply with the requirements of the NAIC anation:	Finan	cial Condition Examiners Ha	andbook, provide the name,		
	1	2			3		
	Name(s) All agreements comply.	Location(s)			olete Explanation(s)		
17.3 17.4	Have there been any changes If yes, give full information rela	s, including name changes, in the custodian ating thereto:	(s) ide	entified in 17.1 during the cu	rrent quarter?	Yes	[ ] No [ X ]
	1	2		3	4		
	Old Custodian	New Custodian		Date of Change	Reason		
	such. ["that have access the Name of Name o	on behalf of the reporting entity. For assets to the investment accounts"; "handle section of the investment accounts"; "handle section of the firm or Individual timent Officer	urities"	2 Affiliation	proyees of the reporting entity, i	iole as	
	17.5097 For those firms/indivi	duals listed in the table for Question 17.5, o	do any	firms/individuals unaffiliated	d with the reporting entity (i.e.	Yes	[ ] No [ X ]
	17.5098 For firms/individuals total assets under ma	unaffiliated with the reporting entity (i.e. des anagement aggregate to more than 50% of	signate the re	ed with a "U") listed in the ta porting entity's assets?	ble for Question 17.5, does the	Yes	[ ] No [ X ]
17.6	For those firms or individuals table below.	listed in the table for 17.5 with an affiliation	code o	of "A" (affiliated) or "U" (una	ffiliated), provide the information	n for the	
	1	2		3	4		5 Investment Management
	Central Registration	Name of Firm on bodinish of		Land Fatte Identifica /I F	D = = i=t=== d \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Agreement
	N/A	Name of Firm or Individual Kevin J. Casey		Legal Entity Identifier (LE	Registered With  Not registered	<u>'</u>	(IMA) Filed
18.1 18.2		s of the Purposes and Procedures Manual	of the	NAIC Investment Analysis (	Office been followed?	Yes	[ X ] No [ ]
19.	a. Documentation necess     b. Issuer or obligor is curr     c. The insurer has an actu	rities, the reporting entity is certifying the fol eary to permit a full credit analysis of the sec ent on all contracted interest and principal p ual expectation of ultimate payment of all co esignated 5*GI securities?	curity of payme ontract	does not exist. ents. ed interest and principal.		Yes	[ ] No [ X ]

# **GENERAL INTERROGATORIES**

## PART 2 - HEALTH

#### 1. Operating Percentages:

	1.1 A&H loss percent					85.	2 %
	1.2 A&H cost containment percent					6.	0 %
	1.3 A&H expense percent excluding cost containment expenses					11.	8 %
2.1	Do you act as a custodian for health savings accounts?		Yes [	]	No [ X	[ ]	
2.2	If yes, please provide the amount of custodial funds held as of the reporting date	.\$					
2.3	Do you act as an administrator for health savings accounts?		Yes [	]	No [ X	[ ]	
2.4	If yes, please provide the balance of the funds administered as of the reporting date	\$					
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?		Yes [	]	No [ X	[ ]	
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?		Yes [	]	No [ X		

# **SCHEDULE S - CEDED REINSURANCE**

Showing All New Reinsurance Treaties - Current Year to Date

		Showing All New Reinsura	ince Treaties	- Current Yea	ar to Date		
1	2	3 4	5	6	7	8 Certified	9 Effective Date of
NAIC Company Code	ID Number	Effective Date Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Reinsurer	Reinsurer Rating (1 through 6)	Certified
Codo	ramboi	Pare Name of N	Garioalotion	Codod	Type of Remodes	(Tanoagn o)	rtating
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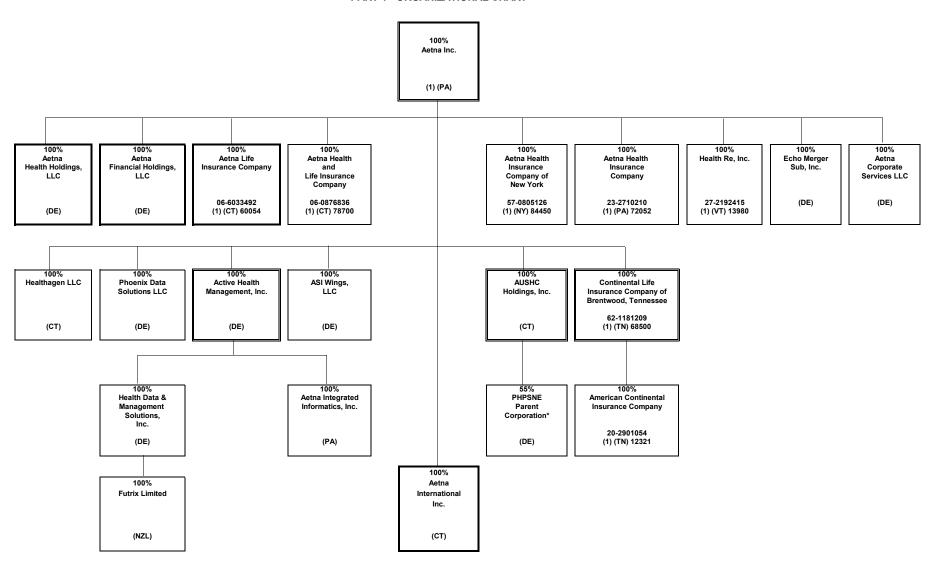
# SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories Direct Business Only Federal Employees Health Annuity Property/ Casualty Active Accident and Benefits Premiums & Total Status Health Other Columns 2 Medicaid Program Deposit-Type Premiums States, etc. (a) Title XVIII Title XIX Premiums Consideration Premiums Through 7 Contracts 1. Alabama ALN. Alaska. 2. AK N 0 3. Arizona. ΑZ .N. 0 4. Arkansas. AR N 0 California ... 5. CA N 0 6. Colorado . 0 CO N 7. Connecticut ..... CT N 0 8. Delaware. 0 DE N District of Columbia . DC 9. N 0 10. Florida .. 0 - FL N. Georgia ..... 11. .. GA N 0 12. Hawaii ... . HI N. 0 13. Idaho .. .. ID N 0 Illinois. 14. Ш N 0 15. Indiana .. IN N 0 16. lowa .. IΑ N 0 17. Kansas. . KS N. 0 18. Kentucky .. ΚY N 0 Louisiana. 19. LA .N. 0 20. Maine .. MF N 0 21. Maryland ... MD .N. 0 22. Massachusetts ... MA N 0 117.360.667 103.725.785 221.086.452 23. Michigan .. . MI L 24. Minnesota N 0 MN Mississippi ..... 25. . MS N 0 26. Missouri . 0 MO N. 27. Montana. . MT N 0 28. Nebraska .. 0 NE .N. 29. Nevada ... .. NV N 0 30. New Hampshire ...... NH N 0 31. New Jersey ... .. NJ N 0 32. New Mexico ... 0 . NM N 33. New York ... .. NY N 0 North Carolina ..... 34. . NC N 0 35. North Dakota ..... .... ND N. 0 36. Ohio. OH N 0 Oklahoma ...... 37. ... OK .N. 0 38. Oregon ... OR N 0 39. Pennsylvania .... .... PA N 0 Rhode Island 40. 0 RI N South Carolina ...... SC 41. N 0 42. South Dakota ... 0 SD N. Tennessee ..... 43. TN N 0 44. Texas .. 0 TX .N. 45. Utah ... . UT N 0 46. Vermont .. VT N. 0 47. Virginia ... . VA N 0 48. Washington ... . WA N 0 West Virginia ... 49. .. WV N 0 Wisconsin .... 50. WI N 0 51. Wyoming. .. WY N. 0 American Samoa ..... AS 52. N 0 53. Guam .. -- GU .N. 0 Puerto Rico ... 54. PR N 0 55. U.S. Virgin Islands ... VI N 0 Northern Mariana 56. N 0 Islands MP 57. Canada. CAN N 0 Aggregate Other Aliens ..... 58. 0 0 OT XXX 0 0 0 0 0 0 59. 117.360.667 103.725.785 221.086.452 Subtotal XXX 0 0 0 0 0 Reporting Entity 60. Contributions for Employee Benefit Plans XXX Totals (Direct Business) 117,360,667 0 0 221,086,452 0 61. 103,725,785 XXX DETAILS OF WRITE-INS 58001. XXX 58002. XXX 58003 Summary of remaining 58998. write-ins for Line 58 from ..0 .0 ..0 .0 ..0 0. ..0 .0 overflow page. XXX Totals (Lines 58001 through 58999. 58003 plus 58998)(Line 58 0 0 0 0 0 0 0 0 above) XXX

Active Status Counts:	
L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG1	R - Registered - Non-domiciled RRGs0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state0	Q - Qualified - Qualified or accredited reinsurer0
N - None of the above - Not allowed to write business in the state 56	

#### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

#### PART 1 - ORGANIZATIONAL CHART

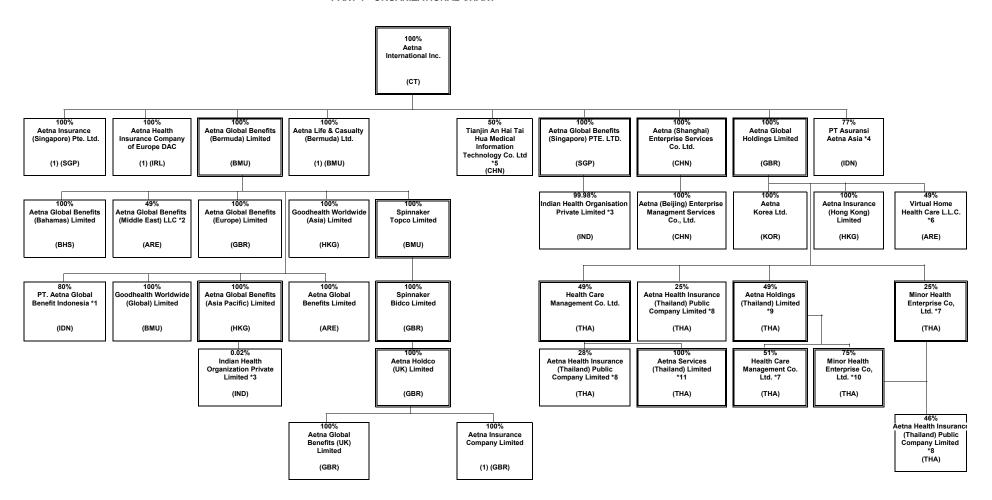


#### (1) Insurers/HMO's

Percentages are rounded to the nearest whole percent and based on ownership of voting rights. Double borders indicate entity has subsidiaries shown on the same page. Bold borders indicate entity has subsidiaries shown on a separate page.

 $<sup>^{\</sup>star}$  PHPSNE Parent Corporation is also 45% owned by third parties.

#### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



<sup>\*1</sup> PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.

<sup>\*2</sup> Aetna Global Benefits (Middle East) LLC is also 51% is owned by Euro Gulf LLC, Aetna's Nominee.

<sup>\*3</sup> Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.

<sup>\*4</sup> PT Asuransi Aetna Asia is also 23% owned by PT Asuransi Central Asia.

<sup>\*5</sup> Tianjin An Hai Tai Hua Medical Information Technology Co., Ltd is also 50% owned by Tianjin Hai Tai Group Co., Ltd

<sup>\*6</sup> Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC

<sup>\*7</sup> Health Care Management Co. Ltd. Is also owned by Aetna Global Benefits (Bermuda) Limited (1 share).

<sup>\*8</sup> Aetna Health Insurance (Thailand) Public Company Limited is also owned by Aetna Global Benefits (Bermuda) Limited (1 share), Mr. Sansanapongpherchar (1 Share),

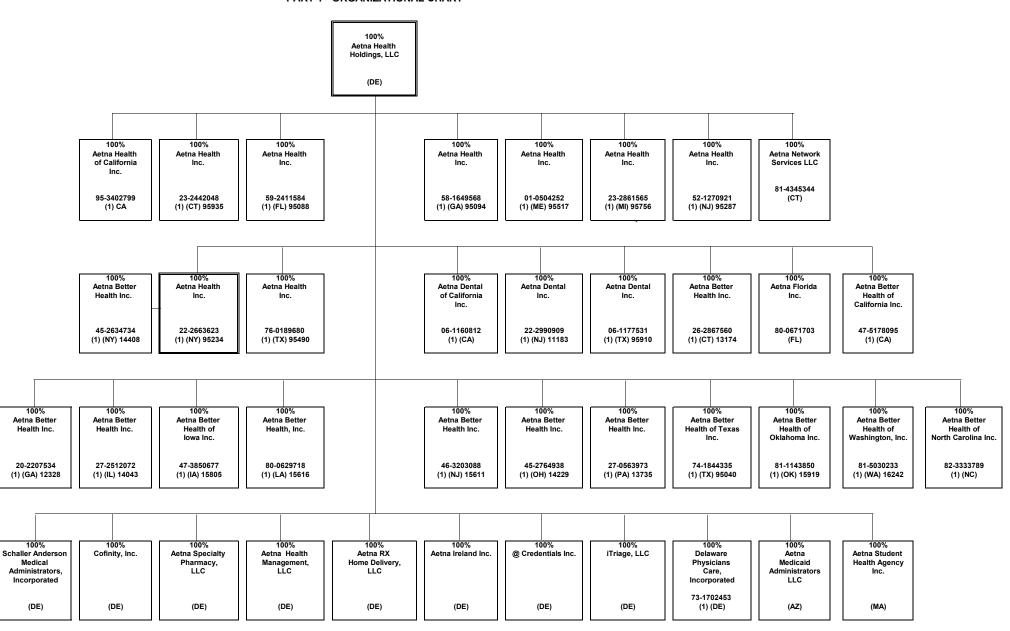
Mr. Jitphasong Itsaraphakded (1 Share); Mrs. Suphee Wattana (1 Share); and Mr. Buncha Tamphragom (1 Share)

<sup>\*9</sup> Aetna Holdings (Thailand) Limited is aslo 51% owned by Mr. Paiboon Sutantivorakoon plus Aetna Benefits (Bermuda) Limited owns 1 share.

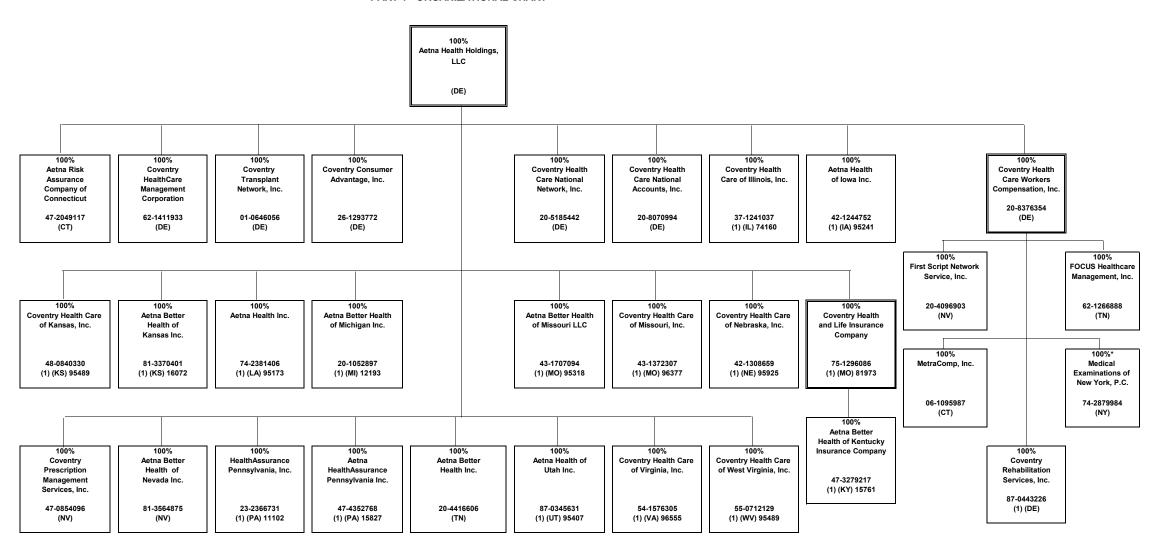
<sup>\*10</sup> Minor Health Entreprise Co, Ltd is is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited

<sup>\*11</sup> Aetna Services (Thailand) Limited is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited.

#### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

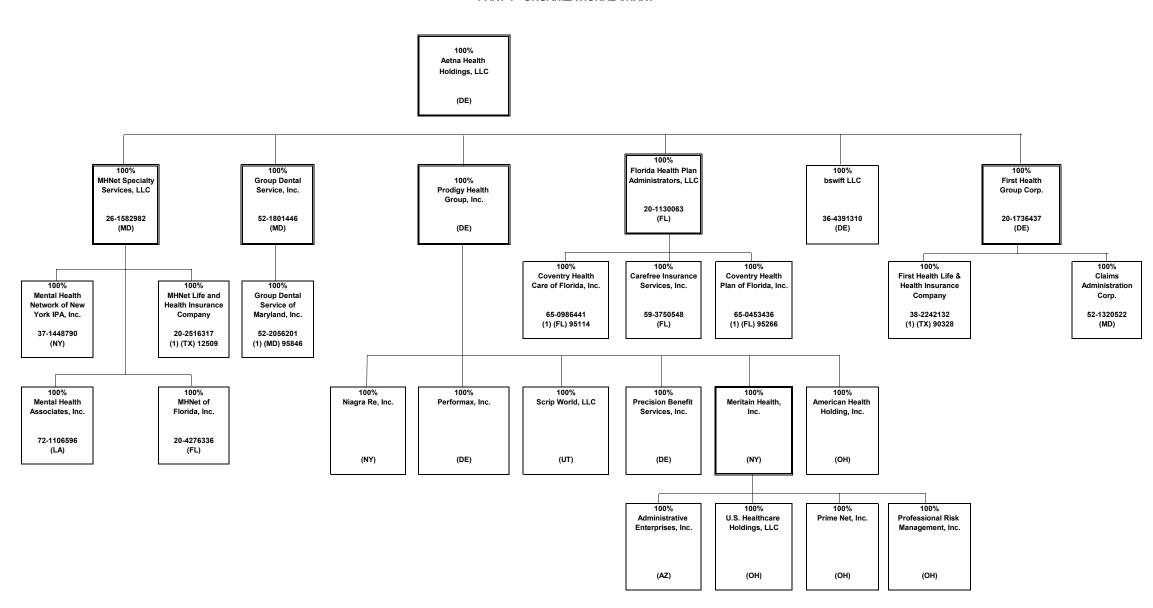


#### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

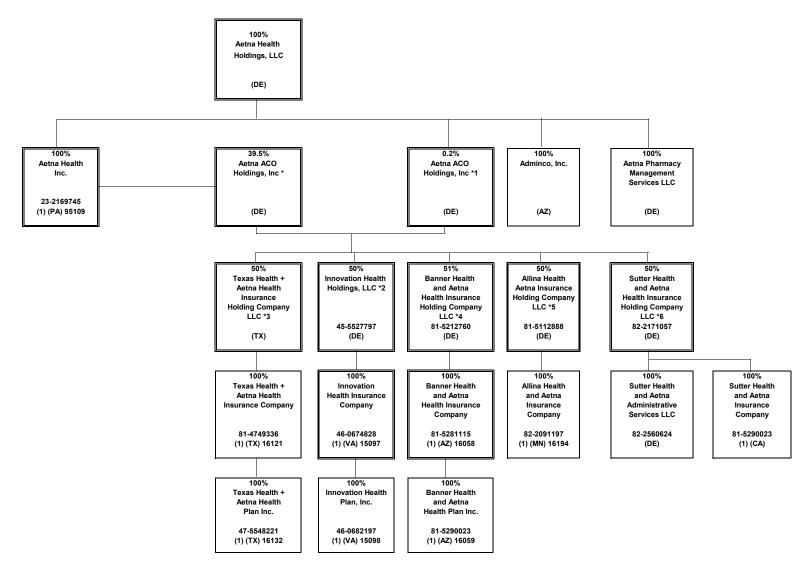


<sup>\*100%</sup> owned through Aetna's nominees

#### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



#### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



<sup>\*1</sup> Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

<sup>\*2</sup> Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

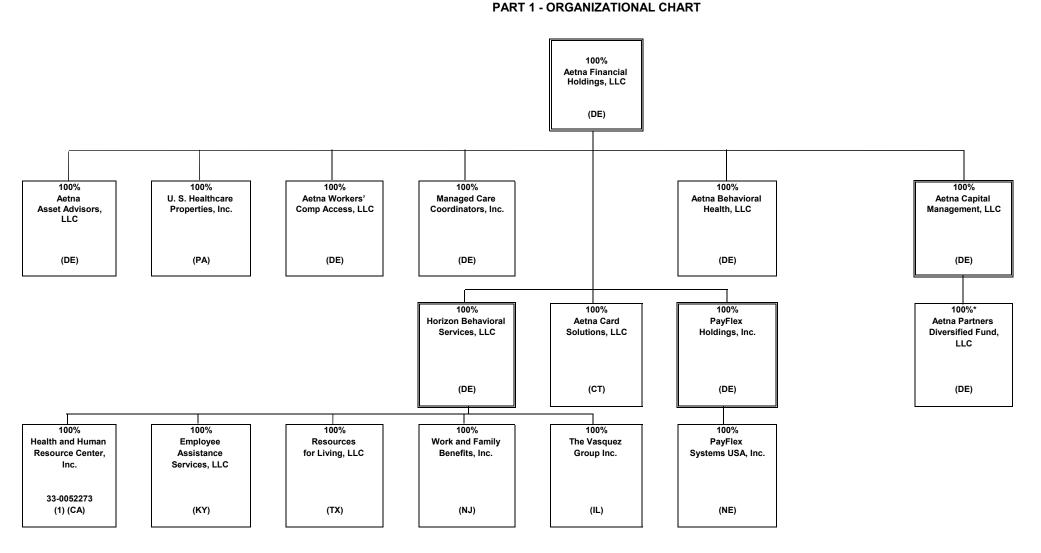
<sup>\*3</sup> Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

<sup>\*4</sup> Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.

<sup>\*5</sup> Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.

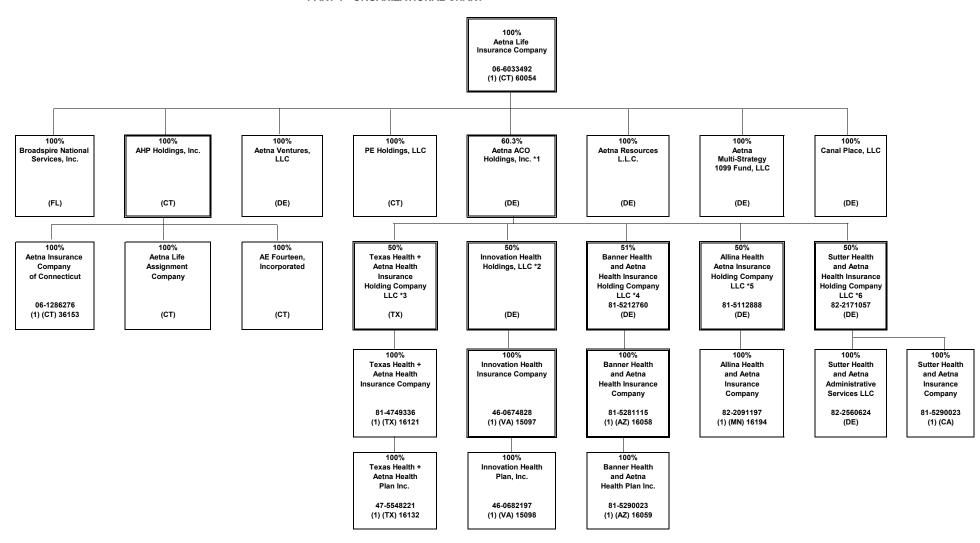
<sup>\*6</sup> Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



<sup>\*</sup> Aetna Life Insurance Company, Aetna Health and Life Insurance Company and Aetna Health Management, LLC own substantially all of the non-managing member interests of Aetna Partners Diversified Fund, LLC.

#### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



<sup>\*1</sup> Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

<sup>\*2</sup> Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

<sup>\*3</sup> Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

<sup>\*4</sup> Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.

<sup>\*5</sup> Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.

<sup>\*6</sup> Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.

					חוות		L OF INSURANC								<del></del>
1	2	3	4	5	6	7	8	9	10	11	_12	13	14	15	16
											Type	If		,	
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											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management.	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Craun		Company	ID	Federal		(U.S. or	Parent, Subsidiaries		Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	
Group					0117			Loca-		Directly Controlled by	,				
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	
	NA INC.	00000	23-2229683	3060706	0001122304	N	Aetna Inc.	PA	UIP	Aetna Inc.		0.000		N	0
	NA INC.	00000	30-0123754	0	0		Aetna Health Holdings, LLC	DE	UDP	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	00000	95-3402799	0	0		Aetna Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	95935	23-2442048	0	0		Aetna Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	95088	59-2411584	0	0		Aetna Health Inc.	FL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	95094	58-1649568	0	0		Aetna Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC	95517	01-0504252	0	0		Aetna Health Inc.	ME	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	95756	23-2861565	0	0		Aetna Health Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC	95287	52-1270921	0	0		Aetna Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	95234	22-2663623	0	0		Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	NA INC	14408	45-2634734	0	0		Aetna Better Health Inc.	NY	IA	Aetna Health Inc. (NY)	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	95490	76-0189680	0	0		Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC	95040	74-1844335	0	0	l	Aetna Better Health of Texas Inc.	TX	IIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	12328	20-2207534	0	0		Aetna Better Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001 AETI	NA INC.	00000	06-1160812	0	0		Aetna Dental of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	11183	22-2990909	0	0		Aetna Dental Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N.	0
	NA INC.	95910	06-1177531	0	0		Aetna Dental Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	00000	30-0123760	0	0		Aetna Rx Home Delivery, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	NA INC.	00000	13-3670795	0	0		Aetna Health Management, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	00000	22-3187443	0	0		Aetna Ireland Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	00000	57-1209768	0	0		Aetna Specialty Pharmacy, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	NA INC.	00000	20-1274723	0	0		Cofinity. Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	NA INC.	00000	23-2671370	0	0		@Credentials Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001 AETI	NA INC.	00000	23-20/ 13/0	0	0		Aetna Services (Thailand) Limited	THA	NIA	Health Care Management Co. Ltd.	Ownership	100.000	Aetna Inc.		20
	NA INC.	13735	27-0563973	0	0		Aetna Better Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	13174	26-2867560	0	0		Aetna Better Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001 AETI	NA INC.	00000	47-5178095	0	0		Aetna Better Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	NN	0
	NA INC.	14043	27-2512072	0	0		Aetna Better Health Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	NA INC.	15805	47-3850677	0	0		Aetna Better Health of Iowa Inc.	IA	IA		Ownership	100.000	Aetna Inc.		0
	NA INC.	15616	80-0629718	0	0					Aetna Health Holdings, LLC				N	
				0	0		Aetna Better Health, Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	NA INC.	00000	80-0671703	0	0		Aetna Florida Inc.	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	14229	25-2764938	0	0		Aetna Better Health Inc.	H	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	NA INC.	15611	46-3203088	0	0		Aetna Better Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	15919	81-1143850	0	0		Aetna Better Health of Oklahoma Inc.	0K	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	00000	04-2708160	0	0		Aetna Student Health Agency Inc.	MA	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001 AETI	NA INC	00000	73-1702453	0	0		Delaware Physicians Care, Incorporated	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
				1.	1.		Schaller Anderson Medical Administrators,							_   <sup>1</sup>	
	NA INC.	00000	01-0826783	0	0		Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	00000	86-0842559	0	0		Aetna Medicaid Adminstrators LLC	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC	00000	45-2944270	0	0		iTriage, LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
	NA INC.	00000	16-1471176	0	0		Prodigy Health Group, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	NA INC	00000	45-4901541	0	0		Aetna ACO Holdings, Inc	DE	NI A	Aetna Health Holdings, LLC	Ownership	0.200	Aetna Inc.	Y	3
	NA INC.	00000	45-5527797	0	0		Innovation Health Holdings, LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	Aetna Inc.	N	6
	NA INC	15097	46-0674828	0	0		Innovation Health Insurance Company	VA	IA	Innovation Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
.0001 AETI	NA INC.	15098	46-0682197	0	0		Innovation Health Plan, Inc.	VA	IA	Innovation Health Insurance Company	Ownership	100.000	Aetna Inc.	N	0
		]		l	]		Texas Health + Aetna Health Insurance Holding							-   - '	
.0001 AETI	NA INC	00000	81-3789357	0	0		Company LLC	TX	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	Aetna Inc.	N	9
			1	1	1		Texas Health + Aetna Health Insurance Company			Texas Health + Aetna Health Insurance	1			_ [	
_0001 AETI	NA INC	16121	81-4749336	0	0			TX	IA	Holding Company LLC	Ownership	100.000	Aetna Inc.	N	0
										Texas Health + Aetna Health Insurance	1	1			
0001 AET	NA INC.	16132	47-5548221	0	0		Texas Health + Aetna Health Plan Inc.	TX	IA	Company	Ownership	100.000	Aetna Inc.	N	0
	NA INC.	95109	23-2169745	0	0		Aetna Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership.	100.000	Aetna Inc.	N	0
	NA INC.	00000	45-4901541	0	0		Aetna ACO Holdings. Inc.	DE	NIA	Aetna Health Inc. (PA)	Ownership	39.500	Aetna Inc.	Y	3
	NA INC.	00000	20-0438576	lo	0		Niagara Re, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	N	n
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# **SCHEDULE Y**

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					_						Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Croun		-	ID	Federal		(U.S. or	Parent, Subsidiaries			Directly Controlled by	Influence.	Percen-	Liltimata Cantrallina	quired?	
Group Code	O N	Company		RSSD	Oll	International)	Or Affiliates	Loca-	Reporting Entity	Directly Controlled by			Ultimate Controlling	(Y/N)	
	Group Name AETNA INC.	Code 00000	Number	K99D	CIK	international)	Performax. Inc.	tion	NIA	(Name of Entity/Person) Prodigy Health Group, Inc.	Other)	tage 100,000	Entity(ies)/Person(s)  Aetna Inc.	(Y/N)	
0001	AETNA INC.	00000	52-2200070 87-0632355	. 0	0		Scrip World, LLC	UT	NIA NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	N	JV
0001	AETNA INC.	00000	27-1760756	0	0		Precision Benefit Services, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	NN	0
0001	AETNA INC.	00000	31-1368946	0	0		American Health Holding, Inc.	OH	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	NN.	0
0001	AETNA INC.	00000	16-1264154	0	0		Meritain Health, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	86-0537707	0	0		Adminco, Inc.	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	86-0527428	0	0		Administrative Enterprises, Inc.	AZ	NIA	Meritain Health, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	16-1684061	0	0		U.S. Healthcare Holdings, LLC	OH	NIA	Meritain Health, Inc.	Ownership.	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	34-1670299	0	0		Prime Net, Inc.	H	NIA	Meritain Health, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	34-1348032	0	0		Professional Risk Management, Inc.	H	NIA	Meritain Health, Inc.	Ownership	100.000	Aetna Inc.	N	0
							Continental Life Insurance Company of								
0001	AETNA INC.	68500	62-1181209	0	0		Brentwood, Tennessee	TN	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
		1	1							Continental Life Insurance Company of					
0001	AETNA INC.	12321	20-2901054	0	0		American Continental Insurance Company	TN	IA	Brentwood, Tennessee	Ownership	100.000	Aetna Inc.	N	0
1000	AETNA INC	60054	06-6033492	0	0		Aetna Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna Life Insurance Company	Ownership	60.300	Aetna Inc.	Y	3
0001	AETNA INC.	00000	06-1270755	0	0		AHP Holdings, Inc.	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	36153	06-1286276	0	0		Aetna Insurance Company of Connecticut	CT	IA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	06-1028469	0	0		AE Fourteen, Incorporated	CT	NIA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	06-1373153 20-3678339	0	0		Aetna Life Assignment CompanyPE Holdings, LLC	CT	NIA NIA	AHP Holdings, Inc	Ownership	100.000	Aetna Inc.	NN	0
0001	AETNA INC.	00000	06-1423207	0	0		Aetna Resources L.L.C.	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	. 00-1423207	0	0		Canal Place, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	NN	0
	AETNA INC.	00000	20-3180700	0	0		Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	59-2108747	0	0		Broadspire National Services, Inc.	FL	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	. 00 2 1007 17	0	0001552250		Aetna Multi-Strategy 1099 Fund, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	79.250	Aetna Inc.		0
0001	AETNA INC.	00000	41-2035961	0	0		Aetna Financial Holdings, LLC	DE	NIA	Aetna Inc.	Ownership.	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	26-2030792	0	0		Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	23-2354500	0	0		U.S. Healthcare Properties, Inc.	PA	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	38-3704481	0	0		Aetna Capital Management, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	11-3667142	0	0001314522		Aetna Partners Diversified Fund, LLC	DE	NIA	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc.	N	1
D001	AETNA INC.	00000	20-0446676	0	0		Aetna Workers' Comp Access, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000	20-0446713	0	0		Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	23-2670015	0	0		Managed Care Coordinators, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	59-3269144	U	0		Horizon Behavioral Services, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	61-1193498 33-0052273	. U	0		Employee Assistance Services, LLC Health and Human Resource Center, Inc.	KY	NIA IA	Horizon Behavioral Services, LLC Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	NN	0
0001	AETNA INC.	00000	75-2420973	0	0		Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	36-3681261	0	0		The Vasquez Group Inc.	X	NIA	Horizon Behavioral Services, LLC Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	NN.	0
0001	AETNA INC.	00000	22-3178125	l o	0		Work and Family Benefits, Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	27-1773021	اا	0		Aetna Card Solutions, LLC	CT	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	NN	1 0
0001	AETNA INC.	00000	20-5216478	0	0		PayFlex Holdings, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership.	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	91-1774434	0	0		PayFlex Systems USA, Inc.	NE	NIA	PayFlex Holdings, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	78700	06-0876836	0	0		Aetna Health and Life Insurance Company	CT	IA	Aetna Inc.	Ownership.	100.000	Aetna Inc.	N	0
0001	AETNA INC.	72052	23-2710210	0	0		Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	84450	57-0805126	. 0	0		Aetna Health Insurance Company of New York .	NY	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	06-1571642	0	0		Aetna International Inc.	CT	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC	00000	98-0211470	. 0	0		Aetna Life & Casualty (Bermuda) Ltd	BMU	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000		0	0		Aetna Insurance (Singapore) PTE. LTD	SGP	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Bermuda) Limited	BMU	NI A	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	U		Goodhealth Worldwide (Global) Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Europe) Limited	GBR	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Goodhealth Worldwide (Asia) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		U	V		Aetna Global Benefits Limited	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	1n

# **SCHEDULE Y**

				PA	ווחו	A - DE I AI	L OF INSURANC	, C [	TOLL	ING COMPANY	SISIEM				
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											Type	If		,	
											of Control	Control		J.	
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of		- 1			Provide		3	
0			ID	F11			Names of	ciliary	to	Discoult Constant local base	Attorney-in-Fact,		Lille and Controlling	Re-	
Group	0 11	Company		Federal	0114	(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	<u> </u>
0001	AETNA INC.	00000		0	0		PT. Aetna Global Benefits Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	80.000	Aetna Inc.	N	4
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Middle East) LLC	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	49.000	Aetna Inc.	N	5
0001	AETNA INC.	00000		0			Aetna Global Benefits (Asia Pacific) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	
0001	AETNA INC.	00000		0	0		Spinnaker Topco Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N N	V
0001	AETNA INC.	00000		0	0		Spinnaker Bidco Limited	GBR	NIA	Spinnaker Topco Limited	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Aetna Holdco (UK) Limited	GBR	NIA	Spinnaker Bidco Limited	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		PT Asuransi Aetna Asia	IDN	NIA	Aetna International Inc.	Ownership	77.000	Aetna Inc.	N	13
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (UK) Limited	GBR	NIA	Aetna Holdco (UK) Limited	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Aetna Insurance Company Limited	GBR	IA	Aetna Holdco (UK) Limited	Ownership.	100.000	Aetna Inc.	N	0
	ALINA IIIO.			•	•		nother modration company Emilited			Aetna Global Benefits (Asia Pacific)	omici dirip		netha mo.		
0001	AETNA INC.	00000		0	0		Indian Health Organisation Private Limited	IND	NIA	Limited	Ownership	0.020	Aetna Inc.	N	2
							Aetna Health Insurance Company of Europe DAC								
0001	AETNA INC.	00000		0	0		notice roar til modifanos company or zaropo sito	IRL	IA	Aetna International Inc.	Ownership.	100.000	Aetna Inc.	N	0
							Aetna (Shanghai) Enterprise Services Co. Ltd.								
0001	AETNA INC.	00000		0	0			CHN	NIA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
							Aetna (Beijing) Enterprise Management			Aetna (Shanghai) Enterprise Services Co.				,	
0001	AETNA INC.	00000		0	0		Services Co., Ltd.	CHN	NIA	Ltd	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Singapore) PTE. LTD	SGP	NI A	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	0
										Aetna Global Benefits (Singapore) PTE, LTD.				,	
0001	AETNA INC	00000		0	0		Indian Health Organisation Private Limited	IND	NIA		Ownership	99.980	Aetna Inc.	N	2
0001	AETNA INC.	00000	22-2578985	0	0		AUSHC Holdings, Inc.	CT	NI A	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Aetna Global Holdings Limited	GBR	NI A	Aetna International Inc.	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000		0	0		Aetna Korea Ltd.	K0R	NIA	Aetna Global Holdings Limited	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Aetna Insurance (Hong Kong) Limited	HKG	NI A	Aetna Global Holdings Limited	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000		0	0		Futrix Limited	NZL	NIA	Health Data & Management Solutions, Inc	Ownership	100.000	Aetna Inc.		0
0001	AETNA INC.	00000	06-1182176	0	0		PHPSNE Parent Corporation	DE	NI A	AUSHC Holdings, Inc.	Ownership	55.000	Aetna Inc.	N	7
0001	AETNA INC.	00000	52-2182411	0	0		Active Health Management, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	47-0970432	0	0		Health Data & Management Solutions, Inc	DE	NIA	Active Health Management, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	23-2604867	0	0		Aetna Integrated Informatics, Inc.	PA	NIA	Active Health Management, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	13980	27-2192415	0	0		Health Re, Inc.	VT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	81-0579372 46-2469464	0	0		Phoenix Data Solutions LLC Healthagen LLC	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	NNN	Q
				0	0				NIA	Aetna Inc.					0
0001	AETNA INC.	00000	51-0029326	0	0		ASI Wings, LLC Echo Merger Sub, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	NN	0
0001	AETNA INC.	00000		0	0		Aetna Corporate Services, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	NN	0
0001	AETNA INC.	81973	75–1296086	0	0		Coventry Health and Life Insurance Company	MO		Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	יייי ע
1 000	ALINA INC.	۱۳۱۵ و	13-1230000	·	· · · · · · · · · · · · · · · · · · ·		Aetna Better Health of Kentucky Insurance	WU	IA	Coventry Health and Life Insurance Company	owner zurh		netha IIIC.	IN	ν
0001	AETNA INC.	15761	47-3279217	n	lo		Company	KY	IA	OUVERTRY HEATTH AND LITE HISUITANCE COMPANY	Ownership.	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	52-1801446	l	l		Group Dental Service, Inc.	MD	NIA	Aetna Health Holdings, LLC	Owner Ship	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95846	52-2056201	Ĭ	lő		Group Dental Service, Inc.	MD	IA	Group Dental Service, Inc.	Ownership	100.000	Aetna Inc.	NN	0
0001	AETNA INC.	070	81-4345344	0	0		Aetna Network Services LLC	CT	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95241	42-1244752	0	0		Aetna Health of Iowa Inc.	IA	IA	Aetna Health Holdings, LLC	Ownership.	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95925	42-1308659	0	0		Coventry Health Care of Nebraska, Inc.	NE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
			] = .000000				Aetna Risk Assurance Company of Connecticut								
0001	AETNA INC.	00000	47-2049117	0	0		Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95173	74-2381406	0	0		Aetna Health Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	11102	23-2366731	0	0		HealthAssurance Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
							Coventry Prescription Management Services,			, , , , , , , , , , , , , , , , , , ,					
0001	AETNA INC.	00000	47-0854096	0	0		Inc.	NV	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	16148	81-3564875	0	0		Aetna Better Health of Nevada Inc.	NV	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	96555	54-1576305	0	0		Coventry Health Care of Virginia, Inc	VA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	01-0646056	0	0		Coventry Transplant Network, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	96377	43-1372307	0	0		Coventry Health Care of Missouri, Inc	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0

# SCHEDULE Y

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											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filina	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent. Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0001	AETNA INC.	95318	43-1702094	N N N N N N N N N N N N N N N N N N N	n CIR	international)	Aetna Better Health of Missouri LLC	MO	IA	Aetna Health Holdings, LLC	Ownership	100,000	Aetna Inc.	(1/N) N	
0001	AETNA INC.	95408	55-0712129	0	0		Coventry Health Care of West Virginia, Inc	WV	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	62-1411933	0	0		Coventry HealthCare Management Corporation	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	15827	47-4352768	0	0		Aetna HealthAssurance Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95489	48-0840330	0	0		Coventry Health Care of Kansas, Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	0
0001	AETNA INC.	16072	81-3370401	0	0		Aetna Better Health of Kansas Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	12193	20-1052897	0	0		Aetna Better Health of Michigan Inc	MI	RE	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	95407	87-0345631	0	0		Aetna Health of Utah Inc.	UT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	Q
0001	AETNA INC.	00000	20-4416606	0	0		Aetna Better Health Inc.	TN	NI A	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	74160	37–1241037	0	0		Coventry Health Care of Illinois, Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
					L	1	Coventry Health Care National Accounts, Inc.				l	400.00	l		
0001	AETNA INC.	00000	20-8070994	0	0			DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	20-5185442	0	0		Coventry Health Care National Network, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	26-1293772	0	0		Coventry Consumer Advantage, Inc.	UE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetha inc.	N	V
0001	AETNA INC.	00000	20-8376354	0	0		Coventry Health Care Workers Compensation,	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N.	0
1 000	AETNA TNO.		20-6370334	0	0		mc.	UE	NIA	Coventry Health Care Workers' Compensation	ownership		Aetha mc.		U
0001	AETNA INC.	00000	20-4096903	0	0		First Script Network Service, Inc.	NV	NIA	Inc.	Ownership	100.000	Aetna Inc.	N.	0
	71E1101 11101		120 1000000	•	·		The compensation convice, me.			Coventry Health Care Workers' Compensation	owner comp		notile ino.		
0001	AETNA INC.	00000	06-1095987	0	0		MetraComp, Inc.	CT	NIA	Inc.	Ownership	100.000	Aetna Inc.	N	0
			1				, , , , , , , , , , , , , , , , , , , ,			Coventry Health Care Workers' Compensation					
0001	AETNA INC.	00000	74-2879984	0	0		Medical Examinations of New York, P.C.	NY	NI A	Inc	Ownership	100.000	Aetna Inc.	N	8
										Coventry Health Care Workers' Compensation	,				
0001	AETNA INC.	00000	62-1266888	0	0		FOCUS Healthcare Management, Inc.	TN	NIA	Inc.	Ownership	100.000	Aetna Inc.	N	0
										Coventry Health Care Workers' Compensation	,				
0001	AETNA INC.	00000	87-0443226	0	0		Coventry Rehabilitation Services, Inc.	DE	NIA	Inc	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	20–1736437	0	0		First Health Group Corp.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
2004	1571 ING						First Health Life & Health Insurance Company			F		400.000			
0001	AETNA INC.	90328	38-2242132	0	0		01-1 Administration 0	TX	IA	First Health Group Corp.	Ownership	100.000	Aetna Inc.	N	Q
0001	AETNA INC.	00000	52-1320522 20-1130063	0	0		Claims Administration Corp	MD	NIA NIA	First Health Group Corp	Ownership	100.000	Aetna Inc.	NN	0
0001	AETNA INC.	95114	65-0986441	0	0		Coventry Health Care of Florida, Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	NN.	0
0001	AETNA INC.	95266	65-0453436	0	0		Coventry Health Plan of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	59-3750548	0	0		Carefree Insurance Services, Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	36-4391310	0	0		bswift LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	]	0	0		Virtual Home Healthcare L.L.C.	ARE	NIA	Aetna Global Holdings Limited	Ownership.	49.000	Aetna Inc.	N	17
0001	AETNA INC.	00000	26-1582982	0	0		MHNet Specialty Services, LLC	MD	NIA	Aetna Health Holdings, LLC	Ownership.	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	37-1448790	0	0		Mental Health Network of New York IPA, Inc	NY	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	12509	20-2516317	0	0		MHNet Life and Health Insurance Company	TX	IA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	72-1106596	0	0		Mental Health Associates, Inc.	LA	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000	20-4276336	0	0		MHNet of Florida, Inc.	FL	IA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	16242	81-5030233	0	0		Aetna Better Health of Washington, Inc.	WA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
	l	1			L		Banner Health and Aetna Health Insurance				L		L		1 1
0001	AETNA INC.	00000	81–5212760	0	0		Holding Company LLC	DE	NI A	Aetna ACO Holdings, Inc.	Ownership	51.000	Aetna Inc.	N	10
0004	AETNIA INIO	10050	04 5004445		L	1	Banner Health and Aetna Health Insurance	4.7		Banner Health and Aetna Health Insurance	0	100 000	A.t., 1		
0001	AETNA INC	16058	81–5281115	U	U		Company	AZ	I A	Holding Company LLC	Ownership	100.000	Aetna Inc.	N	U
0001	AETNA INC.	16059	81-5290023	0	l <sub>0</sub>	1	Banner Health and Aetna Health Plan Inc	AZ	1.4	Banner Health and Aetna Health Insurance	Ownership	100.000	Aetna Inc.	N	0
ו טטע	METINA TINO.	66001	01-0290023	· · · · · · · · · · · · · · · · · · ·	٠		Allina Health and Aetna Health Insurance	AZ		Company	owner strip		AELIIA IIIC.	N	ע
0001	AETNA INC.	00000	81-5112888	n	l <sub>0</sub>	1	Holding Company LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	Aetna Inc.	N	11
1 0001	ALINA INC.	00000	01-0112000	·			norum y company LLC	UL	NI /	Allina Health and Aetna Health Insurance	omioi 3111p				
0001	AETNA INC.	16194	82-2091197	0	0	1	Allina Health and Aetna Insurance Company	MN	IA	Holding Company LLC	Ownership	100.000	Aetna Inc.	N	0
			2 2001107	-	-		Sutter Health and Aetha Insurance Holding			in any company LLO					
0001	AETNA INC.	00000	82-2171057	0	0		Company LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	Aetna Inc.	N	12

# **SCHEDULE Y**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	1
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	1
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)		Entity(ies)/Person(s)	(Y/N)	*
Code	Gloup Name	Code	Number	KSSD	CIK	international)	Sutter Health and Aetna Administrative	tion		Sutter Health and Aetna Insurance Holding	Other)	tage	Entity(les)/Ferson(s)	(1/IN)	-
0001	AETNA INC	00000	82-2560624	0			Services LLC	DF		Company LLC	Ownership	100.000	Astro Inc	N	1 0
1 000 1	AEINA INC.	00000		0			Services LLC	UE		Sutter Health and Aetna Insurance Holding	Owner Simp	100.000	Aetha mc.		U
0001	AETNA INC	00000	81-5290023	0			Sutter Health and Aetna Insurance Company	CA		Company LLC	Ownership	100 000	Aetna Inc.	N	0
	AETNA INC.	00000	. 01-3230023	0			Aetna Holdings (Thailand) Limited	THA		Aetna Global Holdings Limited	Owner Ship		Aetna Inc.	N N	14
	ALINA INC.	00000		0			Aetna Health Insurance (Thailand) Public			Actila diobal holdings Elimited	Owner Strip.	40.000	Actila IIIc.		
0001	AETNA INC.	00000		0 0			Company Limited	THA	NIA	Aetna Global Holdings Limited	Ownership	25 000	Aetna Inc.	N	15
	7LIIV 110.		1	•			Aetna Health Insurance (Thailand) Public			Nothe Grober Hordings Emilited	owner on p		nother mo.		
0001	AETNA INC.	00000		0 0			Company Limited	THA	NIA	Minor Health Entreprise Co. Ltd.	Ownership	46.000	Aetna Inc.	N	15
							Aetna Health Insurance (Thailand) Public								
0001	AETNA INC.	00000	l	0			Company Limited	THA	NI A	Health Care Management Co. Ltd	Ownership	_28.000	Aetna Inc.	N	15
	AETNA INC.	00000		0			Health Care Management Co. Ltd.	THA		Aetna Global Holdings Limited	Ownership		Aetna Inc.	N	19
0001	AETNA INC	00000		0			Minor Health Entreprise Co. Ltd.	THA	NI A	Aetna Global Holdings Limited	Ownership	25.000	Aetna Inc.	N	16
	AETNA INC.	00000		0 0			Minor Health Entreprise Co, Ltd.	THA	NIA	Aetna Holdings (Thailand) Limited	Ownership		Aetna Inc.	N	16
	AETNA INC	00000		0 0			Health Care Management Co. Ltd	THA	NI A	Aetna Holdings (Thailand) Limited	Ownership		Aetna Inc.	N	19
	AETNA INC.	00000		0 0			Aetna Global Benefits (Bahamas) Limited	BHS	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		Aetna Inc.	N	0
	AETNA INC.	00000		0 0			Aetna Pharmacy Management Services LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership		Aetna Inc.	N	0
0001	AETNA INC.	00000	82-3333789	0 0			Aetna Better Health of North Carolina Inc	NC	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
							Tianjin An Hai Tai Hua Medical Information							1	1
0001	AETNA INC.	00000		0 0			Technology Co., Ltd	CHN	NIA	Aetna International Inc.	Ownership	50.000	Aetna Inc.	N	18
														1 '	1 1

Aetna Life Insurance Company, Aetna Health and Life Insurance Company and Aetna Health Management, LLC own substantially all of the non-managing membership interests.  Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.  Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).  PT. Aetna Global Benefits (Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.  Aetna Global Benefits (Middle East) LLC is also 50% owned by Euro Gulf LLC, Aetna's Nominee.  Innovation Health Holdings LLC. Is also 50% owned by Inova Health System Foundation.  PHPSNE Parent Corporation is 55% owned by Aetna Global Benefits (Middle East) LLC is also 50% owned by Aetna Global Benefits (Middle East) LLC is also 50% owned by Aetna Global Benefits (Nom-affiliates) which are shareholders with varying degrees of ownership.	
Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).  PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.  Aetna Global Benefits (Middle East) LLC is also 51% owned by Euro Gulf LLC, Aetna's Nominee.  Innovation Health Holdings LLC. Is also 50% owned by Inova Health System Foundation.  PHPSNE Parent Corporation is 55% owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.	
PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.  5	
Aetna Global Benefits (Middle East) LLC is also 51% owned by Euro Gulf LLC, Aetna's Nominee.  Innovation Health Holdings LLC. Is also 50% owned by Inova Health System Foundation.  PHPSNE Parent Corporation is 55% owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.	
Innovation Health Holdings LLC. Is also 50% owned by Inova Health System Foundation	
7	
10 Hadisəl Furnisations of New York D.C. is 400% amond through Astrology amond through Astrology	
8	
9Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.	
10 Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.	
11	
12 Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.	
13 PT Asuransi Aetna Asia is also 23% owned by PT Asuransi Central Asia.	
14 Aetna Holdings (Thailand) Limited is also 51% owned by Mr. Paiboon Sutantivorakoon plus Aetna Global Benefits (Bermuda) Limited owns 1 share	
45	ha Tamphragom (1 share)
16	
17 Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC.	
18 Tianjin An Hai Tai Hua Medical Information Technology Co., Ltd is also 50% owned by Tianjin Hai Tai Group Co., Ltd.	
19 Health Care Management Co. Ltd. Is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited.	
20 Aetna Services (Thailand) Limited is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited.	

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

			Response
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with	this statement?	NO
	Explanation:		
1.	Business not written		
1.	Bar Code:  Medicare Part D Coverage Supplement [Document Identifier 365]		

# **OVERFLOW PAGE FOR WRITE-INS**

## **SCHEDULE A - VERIFICATION**

Real Estate

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted ying ying		
7.	Deduct current year's other than temporary impainment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

## **SCHEDULE B - VERIFICATION**

Mortgage Loans

	iviorigage Loans	1	0
		1	2 5 7 5 7 7
		V . 5 .	Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in the st parameter and a smitting the east as a smitting the same and a smitting		
9.	Total foreign exchange change in book value/recorded investment except except except except except the second except exce		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

# **SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	Other Long-Term invested Assets		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

# **SCHEDULE D - VERIFICATION**

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	1,200,283	1,201,159
2.	Cost of bonds and stocks acquired	16,083,259	
3.	Accrual of discount	1,480	
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration for bonds and stocks disposed of		
7.	Deduct amortization of premium	648	876
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized	122,445	
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	15,954,082	1,200,283
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	15,954,082	1,200,283

# **SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

	1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value
	Beginning	During	During	During	End of	End of	End of	December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)		445,375,446	469,977,479	462,682	110,083,165	127,696,563	103,557,212	107,034,960
2. NAIC 2 (a)	0				0	0	0	0
3. NAIC 3 (a)	0				0	0	0	0
4. NAIC 4 (a)	0				0	0	0	0
5. NAIC 5 (a)	0				0	0	0	0
6. NAIC 6 (a)	0				0	0	0	0
7. Total Bonds	127,696,563	445,375,446	469,977,479	462,682	110,083,165	127,696,563	103,557,212	107,034,960
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2					0	0	0	0
10. NAIC 3					0	0	0	0
11. NAIC 4					0	0	0	0
12. NAIC 5					0	0	0	0
					0	0	0	0
13. NAIC 6	0	0	<u> </u>	0	3	0	0	0
	0	0 445,375,446	0 469,977,479	0 462.682	0 0 110,083,165	0 0 127.696.563	0 0 103,557,212	0 0 107,034,960

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

# **SCHEDULE DA - PART 1**

		Short-Te	erm Investments			
				3	4	5
		Bo Adju Ca ng ue	P , le	Actual Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
9199999 Totals			×× ×			

# **SCHEDULE DA - VERIFICATION**

Short-Term Investments

	Short-remi invesiments	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	548
2.	Cost of short-term investments acquired		55,425
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		55,973
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	0	0

# Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards NONE

Schedule DB - Part B - Verification - Futures Contracts

# NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE** 

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

# NONE

# **SCHEDULE E - PART 2 - VERIFICATION**

(Cash Equivalents)

	(-11-11-11-11-11-11-11-11-11-11-11-11-11		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	105,835,884	74,416,905
2.	Cost of cash equivalents acquired	1,470,675,177	1,768,431,471
3.	Accrual of discount	1,757,172	1, 195,583
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals	(837)	7
6.	Deduct consideration received on disposals	1,490,663,774	1,738,208,082
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	87,603,622	105,835,884
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	87,603,622	105,835,884

# Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed **NONE** 

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made NONE

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid NONE

# **SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

	1	OHOW 7 WILL	bing-reim bonds and Stock Acquired buring the Current Quarte	1				
1 2	3	4	5	6	7	8	9	10
								NAIC Desig-
								nation or
				Number of			Paid for Accrued	Market
CUSIP		Date		Shares of			Interest and	Indicator
Identification Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	(a)
3617G7-UT-0 GOVT NATL MTGE ASSN II POOL BF1494 3.500% 01/20/48		08/08/2018	WACHOV I A		4,881,419	4,877,608	9,484	1
912828-Y6-1 US TREASURY NOTE/BOND 2.750% 07/31/23		07/25/2018	MIZUHO SECURITIES USA		4,984,246	5,000,000	0	1
0599999. Subtotal - Bonds - U.S. Governments					9,865,665	9,877,608	9,484	XXX
8399997. Total - Bonds - Part 3					9,865,665	9,877,608	9,484	XXX
8399998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX
8399999. Total - Bonds					9,865,665	9,877,608	9,484	XXX
8999997. Total - Preferred Stocks - Part 3					0	XXX	0	XXX
8999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks					0	XXX	0	XXX
9799997. Total - Common Stocks - Part 3					0	XXX	0	XXX
9799998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX
9799999. Total - Common Stocks					0	XXX	0	XXX
9899999. Total - Preferred and Common Stocks					0	XXX	0	XXX
				<u> </u>				
				l				
9999999 - Totals		H			9,865,665	XXX	9.484	XXX
					*,,		*,,	

<sup>(</sup>a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

# **SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stock Sold. Redeemed or Otherwise Disposed of During the Current Quarter

		SHOW All LO	ng-renn bo	nus and Stoc	k Solu, Kec	reemed or c	Juliei wise i	zisposea c	וו של וווטל וו	ne Current Qua	arter							
1 2 3 4	5	6	7	8	9	10	Ch	ange In Boo	ok/Adjusted	Carrying Value		16	17	18	19	20	21	22
							11	12	13	14	15							
										Total T	Γotal							NAIC
									Current	Change in Fo	oreign							Desig-
									Year's	Book/ Exc	change	Book/				Bond		nation
						Prior Year		Current	Other Than	Adjusted Cha		Adjusted	Foreign			Interest/	Stated	or
							Unrealized	Year's	Temporary			Carrying	Exchange			Stock	Con-	Market
CUSIP		Number of				Adjusted	Valuation	(Amor-	Impairment			Value at	Gain	Gain	Total Gain	Dividends	tractual	In-
Ident- For- Dispo		Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 - Ca		Disposal	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	dicator
ification Description eign Dat	e of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13) V	/alue	Date	Disposal	Disposal	Disposal	DuringYear	Date	(a)
GOVT NATL MTGE ASSN II POOL BF1494 3.500%							_		_		_		_	_	_			
	018 Paydown		7,848	7,848	7,854	0	0	(6)	0	(6)	0	7,848	0	0	0		01/20/2048	. 1
0599999. Subtotal - Bonds - U.S. Governments			7,848	7,848	7,854	0	0	(6)		(6)	0	7,848	0	0	0	23	XXX	XXX
8399997. Total - Bonds - Part 4			7,848	7,848	7,854	0	0	(6)		(6)	0	7,848	0	0	0	23	XXX	XXX
8399998. Total - Bonds - Part 5			XXX	XXX	XXX	XXX	XXX	XXX	XXX		(XX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999. Total - Bonds			7,848	7,848	7,854	0	0	(6)	0	(6)	0	7,848	0	0	0	23	XXX	XXX
8999997. Total - Preferred Stocks - Part 4			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
8999998. Total - Preferred Stocks - Part 5			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX X	(XX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799997. Total - Common Stocks - Part 4			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799998. Total - Common Stocks - Part 5			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX X	(XX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999. Total - Common Stocks			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9899999. Total - Preferred and Common Stocks			0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9999999 - Totals		ļ	7.848	XXX	7.854			(6)	0	(6)	0	7.848	0		0	23	XXX	XXX

<sup>(</sup>a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues......

# Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made NONE

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

# **SCHEDULE E - PART 1 - CASH**

Month	Fnd	Depository	/ Balances
IVIOLITI	LIIU	Depository	Daianices

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
			Amount of Interest Received	Amount of	6	7	8	
		Rate of		at Current				
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*
Citibank, N.A New Castle, DE					503 , 150		4,479,603	XXX
Bank of America Charlotte, NC					4,344,606		1, 102,000	XXX
0199998. Deposits in depositories that do not exceed the allowable limit in any one depository (See								
instructions) - Open Depositories	XXX	XXX	_					XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	4,847,756	11,303,091	5,581,603	XXX
0299998. Deposits in depositories that do not exceed the allowable limit in any one depository (See	2007	2007						2004
instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0		0	•	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	4,847,756	11,303,091	5,581,603	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
								<b>+</b>
								ļ
	·							
								<b></b>
	·							
								<del> </del>
								<del></del>
	·							
0599999. Total - Cash	XXX	XXX	0	0	4,847,756	11,303,091	5,581,603	XXX

# **SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter

		Show investments Ov						
1	2	3	4	5	6	7	8	9
						Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
0599999. Total - U.S. Government Bonds		,				0	0	
1099999. Total - All Other Government Bo	ands					0	0	
1799999. Total - U.S. States. Territories at						0	0	
2499999. Total - U.S. Political Subdivision						0	0	
						U	U	
3199999. Total - U.S. Special Revenues E		1	00 (00 (0040	2.260	10/10/2018	5.006.165	0	7,857
AMERICAN ELEC POWER CP 4-2 144A			09/06/2018		10/10/201810/17/2018		<sup>0</sup>	
AMERICAN ELEC POWER OF 4-2 144A				2.400 2.440	10/17/2018			485
AWERICAN ELEC POWER OF 4-2 144A .				2.440	10/23/2018	4,964,535		1,015 5,345
AVIATION CAPITAL GROUP CP 4(2) 14	MA		09/21/2018	2.370	10/17/2018	1,675,232		1, 103
CBS CORPORATION CP 4 (2) 144A				2.400	10/29/2018	6,959,981	0	2,320
CONAGRA FOODS INC CP 4(2) 144A			09/28/2018	2.340	10/05/2018	3,235,158	0	631
DTE ELECTRIC CO CP 3(A)3			09/27/2018	2.260	10/02/2018	970,939	ō	244
EASTMAN CHEMICAL CORP. CP 4-2			09/10/2018	2.270	10/09/2018	4,478,737	0	5,931
ENTERGY CORP CP 4(2) 144A			09/06/2018	2.320	10/19/2018	5,223,923	0	8,416
KEURIG DR PEPPER INC CP 4(2) 144A				2.250	10/16/2018	7,299,139	0	12,317
MARRIOTT INTERNATIONAL CP 4(2) 14				2.270	10/01/2018	5,900,000	0	11,533
NEXTERA ENERGY CAP HLDGS CP 4 (2)			09/05/2018	2.320	10/24/2018	3,994,061	0	6,692
NISOURCE INC CP 4(2) 144A			08/31/2018	2.280	10/09/2018	5,012,454	0	9,841
			09/10/2018	2.230 2.310	10/09/2018			4,731 3,507
SPIRE INC CP 4(2) 144A				2.390	10/10/2018	8.767.172	u	5,820
			09/21/2018	2.350	10/04/2018	5.998.824	ر	3,916
WALGREENS BOOT ALLIANCE CP 4(2)	`		09/18/2018	2.340	10/09/2018	4.002.916	n	3,382
WALGREENS BOOT ALLIANCE CP 4(2)			09/11/2018	2.300	10/11/2018	1.234.210	0	1.577
	Miscellaneous (Unaffiliated) - Issuer Obligations					87.603.130	0	96,663
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						87.603.130	0	96,663
4899999. Total - Hybrid Securities	out (orialisation) portuo					0. 1000, 100	0	00,000
5599999. Total - Parent, Subsidiaries and	Affiliates Bonds					0	0	
6099999. Subtotal - SVO Identified Funds						0	0	
7799999. Total - Issuer Obligations						87.603.130	0	96.663
	1.10 %					87,603,130	U	96,663
7899999. Total - Residential Mortgage-Ba						0	0	C
7999999. Total - Commercial Mortgage-Ba						0	0	(
8099999. Total - Other Loan-Backed and	Structured Securities					0	0	C
8199999. Total - SVO Identified Funds						0	0	0
8399999. Total Bonds						87,603,130	0	96,663
60934N-50-0 FEDERATED INVESTORS INC TREASURY	OBLIGATION FUND		09/21/2018	0.000	XXX	492	7	510
8599999. Subtotal - Exempt Money Marke	t Mutual Funds - as Identified by the SVO	<u> </u>		<u> </u>		492	7	510
	1							
8899999 - Total Cash Equivalents						87,603,622	7	97,173